

J1129 U.S. PTO
06/08/01

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PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

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J1129 U.S. PTO
09/09/2001

06/28/01

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 42390.11206
(maximum 12 characters)

First Named Inventor Krishnamurthy Soumyanath

Title: AREA EFFICIENT WAVEFORM EVALUATION AND DC OFFSET CANCELLATION CIRCUITS
Express Mail Label No. EL234215394US

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, D. C. 20231

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)
2. Applicant Claims Small Entity Status. (37 CFR 1.27)
3. Specification (Total Pages 14)
(preferred arrangement set forth below)
 - Descriptive Title of the Invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference sequence listing, a table,
or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawings(s) (35 USC 113) (Total Sheets 5)
5. Oath or Declaration (Total Pages 5)
 - a. Newly Executed (Original or Copy)
 - b. Copy from a Prior Application (37 CFR 1.63(d))
(for Continuation/Divisional with Box 17 completed)
 - i. DELETIONS OF INVENTOR(S) Signed statement attached deleting
inventor(s) named in the prior application, see 37 CFR 1.63(d)(2)
and 1.33(b).
 - c. Unsigned.
6. Application Data Sheet. (37 CFR 1.76)
7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification/Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
- c. Statement verifying identity of above copies
- d.

ACCOMPANYING APPLICATION PARTS

9. _____ Assignment Papers (cover sheet & documents(s))
10. _____ a. Separate 37 CFR 3.73(b) Statement (where there is an assignee)
_____ b. Power of Attorney
11. _____ English Translation Document (if applicable)
12. _____ a. Information Disclosure Statement (IDS)/PTO-1449
_____ b. Copies of IDS Citations
13. _____ Preliminary Amendment
14. _____ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. _____ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. _____ Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. X Other: Copy of Postcard with Express Mail Certificate of Mailing

18A. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:

Continuation Divisional Continuation-in-part (CIP)
Of Prior Application No.: _____ Examiner _____ Group Art Unit _____
(which is a _____ continuation/ _____ divisional/ _____ CIP of prior application no. _____,
which is a _____ continuation/ _____ divisional/ _____ CIP of prior application no. _____) (List entire chain of priority)

Applicant(s): Also include a Preliminary Amendment to amend the specification to claim priority.
For CONTINUATION AND DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18B. Statement under 37 CFR 3.73(b) for continuing application:

The undersigned states that _____ (name of assignee) is
the assignee of the entire right, title, and interest in the accompanying patent application by virtue of an
assignment recorded in the Patent and Trademark Office at Reel. No. _____ Frame No. _____
(or a copy of which is attached).

19. Correspondence Address

Customer Number or Bar Code Label _____
or _____ (Insert Customer No. or Attach Bar Code Label here)
 Correspondence Address Below

NAME Seth Z. Kalson

BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP

ADDRESS 12400 Wilshire Boulevard

Seventh Floor

CITY Los Angeles STATE California ZIP CODE 90025-1026

Country U.S.A. TELEPHONE (408) 720-8300 FAX (408) 720-9397

Name (PRINT/TYPE): Seth Z. Kalson Registration No.: 40,670
Signature: Seth Z. Kalson Date: 6-28-01

FEE TRANSMITTAL FOR FY 2001**TOTAL AMOUNT OF PAYMENT (\$)** 1128.00**Complete if Known:**Application No. Not Yet AssignedFiling Date HerewithFirst Named Inventor Krishnamurthy SourmyanathGroup Art Unit Not Yet AssignedExaminer Name Not Yet AssignedAttorney Docket No. 42390.P11206**METHOD OF PAYMENT** (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666
Deposit Account Name _____ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed: Check
 Credit Card
 Money Order
 Other

FEE CALCULATION**1. BASIC FILING FEE**

Large Entity	Small Entity			
Fee	Fee	Fee	Fee	
Code	(\$)	Code	(\$)	Fee Description
101	710	201	355	Utility application filing fee
106	320	206	160	Design application filing fee
107	490	207	245	Plant filing fee
108	710	208	355	Reissue filing fee
114	150	214	75	Provisional application filing fee

SUBTOTAL (1) \$ 710.00**2. EXTRA CLAIM FEES**

Total Claims	21	- 20** =	1	Extra Claims	Fee from below	Fee Paid
Independent Claims	8	- 3** =	5		X <u>18.00</u>	= <u>18.00</u>
Multiple Dependent					X <u>80.00</u>	= <u>400.00</u>

**Or number previously paid, if greater; For Reissues, see below.

Large Entity **Small Entity**

Fee	Fee	Fee	Fee	Fee Description
Code	(\$)	Code	(\$)	
103	18	203	9	Claims in excess of 20
102	80	202	40	Independent claims in excess of 3
104	270	204	135	Multiple dependent claim, if not paid
109	80	209	40	**Reissue independent claims involving original patent
110	18	210	9	**Reissue claims in excess of 20 and involving original patent

SUBTOTAL (2) \$ 418.00

FEE CALCULATION (c ntinued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code (\$)	
105	130	205	65
127	50	227	25
139	130	139	130
147	2,520	147	2,520
112	920*	112	920*
113	1,840*	113	1,840*
115	110	215	55
116	390	216	195
117	890	217	445
118	1,390	218	695
128	1,890	228	945
119	310	219	155
120	310	220	155
121	270	221	135
138	1,510	138	1,510
140	110	240	55
141	1,240	241	620
142	1,240	242	620
143	440	243	220
144	600	244	300
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	710	246	355
149	710	249	355
179	710	279	355
169	900	169	900
195	300	195	300
196	300	196	300
194	130	194	130
098	130	098	130
091	1,240	091	1,240
Other fee (specify) _____			
Other fee (specify) _____			
SUBTOTAL (3) \$0			

*Reduced by Basic Filing Fee Paid

SUBMITTED BY:

Typed or Printed Name: Seth Z. Kalson

Signature: Seth Z. Kalson Date: 6-28-01

Reg. Number: 40,670 Telephone Number: 408-720-8300

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

EXPRESS MAIL CERTIFICATE OF MAILING

"Express Mail" mailing label number: EL234215394US
Date of Deposit: 10/28/01

I hereby certify that I am causing this paper or fee to be deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and that this paper or fee has been addressed to the Assistant Commissioner for Patents, Washington, D. C. 20231

(Typed or printed name of person mailing paper or fee)

(Signature of person mailing paper or fee)

(Date signed)

DRAFTS - 062604

Serial/Patent No.: **** Filing/Issue Date: Herewith

Client: Intel Corporation

Title: AREA EFFICIENT WAVEFORM EVALUATION AND DC OFFSET CANCELLATION CIRCUITS

BSTZ File No.: 42390_P11206

Atty/Secty Initials: SZK/dkr

Date Mailed: June 28, 2001

Docket Due Date: ****

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

- | | | |
|--|---|--|
| <input type="checkbox"/> Amendment/Response (<u> </u> pgs.) | <input checked="" type="checkbox"/> Express Mail No <u>EL234215394US</u> | <input type="checkbox"/> Check No. <u>4204</u> |
| <input type="checkbox"/> Appeal Brief (<u> </u> pgs.) (in triplicate) | <input type="checkbox"/> Month(s) Extension of Time | Amt: <u>\$1128.00</u> |
| <input checked="" type="checkbox"/> Application - Utility (<u>14</u> pgs., with cover and abstract) | <input type="checkbox"/> Information Disclosure Statement & PTO-149 (<u> </u> pgs.) | <input type="checkbox"/> Check No. _____ |
| <input type="checkbox"/> Application - Rule 1.53(b) Continuation (<u> </u> pgs.) | <input type="checkbox"/> Issue Fee Transmittal | Amt: _____ |
| <input type="checkbox"/> Application - Rule 1.53(b) Divisional (<u> </u> pgs.) | <input type="checkbox"/> Notice of Appeal | |
| <input type="checkbox"/> Application - Rule 1.53(b) CIP (<u> </u> pgs.) | <input type="checkbox"/> Petition for Extension of Time | |
| <input type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal (<u> </u> pgs.) | <input type="checkbox"/> Petition for _____ | |
| <input type="checkbox"/> Application - Design (<u> </u> pgs.) | <input checked="" type="checkbox"/> Postcard | |
| <input type="checkbox"/> Application - PCT (<u> </u> pgs.) | <input type="checkbox"/> Power of Attorney (<u> </u> pgs.) | |
| <input type="checkbox"/> Application - Provisional (<u> </u> pgs.) | <input type="checkbox"/> Preliminary Amendment (<u> </u> pgs.) | |
| <input type="checkbox"/> Assignment and Cover Sheet | <input type="checkbox"/> Reply Brief (<u> </u> pgs.) | |
| <input checked="" type="checkbox"/> Certificate of Mailing Express Mail | <input type="checkbox"/> Response to Notice of Missing Parts | |
| <input checked="" type="checkbox"/> Declaration & POA (<u>5</u> pg.) Unsigned | <input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business | |
| <input type="checkbox"/> Disclose Dirs & Obj & Copy of Inventor's Signed Lswr (<u> </u> pg.) | <input checked="" type="checkbox"/> Transmittal letter, in duplicate Utility | |
| <input checked="" type="checkbox"/> Drawings: <u>5</u> # of sheets includes <u>7</u> figures | <input checked="" type="checkbox"/> Fee Transmittal, in duplicate | |
| <input type="checkbox"/> Other: _____ | | |